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## FEC FORM 3

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FE5AN018

1030590365

## REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

2011 APR -6 AM 7: 45

(Revised 02/2003)

Office Use Only

		<del> </del>					Office Use	s Orlly		
NAME OF TYPE OR PRIN     COMMITTEE (in full)		Example: If typing, type over the lines.				12FE4M5				
DESHEFY FOR	CONG	RESS	ر <b>ک</b> ا	OMMILIT	TIEE			1.1.1.		
					<u> </u>					
ADDRESS (number and street)	1150,14	ANTI	<u>C</u>	STREE	T #12	32				
Check if different than previously										
reported. (ACC)	C.7 0.6.3.4.01-1						40-4	296		
2. FEC IDENTIFICATION NUMBER ▼  COO44268/		CITY				STATE A	Z	ZIP CODE   STATE ▼ DISTRICT		
		3. IS THI REPOI		(N) NEW	OR	AMENI (A)	DED	STATE V	62	
4. TYPE OF REPORT (Choo	se One)	(b) 12-Day	PRF-	Election Repo	ort for the			*		
(a) Quarterly Reports:  April 15 Quarterly Report (Q1)  July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)		Primary (12P) General (120					126)	G) Runoff (12R)		
				Convention (		Special (*	•			
		Electio	on on	M M /	D D /	~ Y Y		in the State of		
January 31 Year-End Report (YE)		(c) 30-Day POST-Election Report for the:								
·			!	General (30G	)	Runoff (3	0R)	Spec	cial (30S)	
Termination Report (TER)		Electio	on on			Y Y Y Y		in the State of	77 - 4.27 - 1. - 1.7 - 1.22	
5. Covering Period O	81	2 ò 7	Ž	through	ŏ 3	1 3 2	àò	Y Y		
I certify that I have examined this	Report and to	the best of	my kn	owledge and i	belief it is tru	e, correct an	d complet	e.		
Type or Print Name of Treasurer	NANCY	JEAN	I D	ESHEF	Υ				•	
Signature of Treasurer	Mani	y Jea	v	Desh	fy D	ate & G	( 0.	2 ž	ŏ 'I 'J	
NOTE: Submission of false, erroneou	us, or incomple	ete information	may s	subject the per	son signing th	nis Report to t	the penaltic	es of 2 U.S.	.C. §437g.	
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